

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>3/10/01</i>		<i>08.01.01</i>
O.I.P.E. CLASSIFIER		<i>10</i>	<i>8-10-01</i>
FORMALITY REVIEW	<i>N8</i>	<i>588</i>	<i>5/15/02</i>
RESPONSE FORMALITY REVIEW	<i>12</i>	<i>58906</i>	<i>07/18/02</i>

# **BEST AVAILABLE COPY**

## **INDEX OF CLAIMS**

= Rejected N ..... Non-elected  
 = Allowed I ..... Interference  
 - (Through numeral) Canceled A ..... Appeal  
 + Restricted O ..... Objected

Claim	Date
Final	
Original	
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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*100*  
*7/2/02*  
*830*